



Secretary of State

Professional Licensing Boards Division
237 Coliseum Drive Macon, Georgia 31217-3858P
(478) 207-2440

For Accounting Use Only:

Deposit Amount _____

Deposit Date _____

WALL CERTIFICATE ORDER FORM FOR: CONDITIONED AIR, ELECTRICAL, LOW VOLTAGE CONTRACTORS AND MASTER PLUMBERS AND UTILITY MANAGERS

INSTRUCTIONS:

To order an 8 1/2 x 11 Wall Certificate suitable for framing with your License Number:

- Complete this form (print clearly)
- Return this form with a \$25.00 fee (**NON-REFUNDABLE**).
- Make personal or company check or money order payable to the
Georgia State Construction Industry Licensing Board,
P.O. Box 13446, Macon GA 31208

PLEASE ALLOW 4 – 6 WEEKS FOR PROCESSING

(Circle one)

Conditioned Air

Electrical

Low Voltage

Master Plumber

Utility Manager

LICENSE NUMBER _____ **Date issued** _____

***[Please note: The license number is issued to an individual,
not a company. Do not request a company
name for the wall certificate.]***

Your daytime phone number _____

**Please be sure you have provided us with the correct mailing address.
Incorrectly addressed mail will not be forwarded by the post office.**

(Print clearly)

Name _____

Address _____

City _____ **State, Zip** _____